

INDIANO VAUGHAN LLP



05-17-06

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PATENT APPLICATION

Art Unit: 3743
Examiner: Ali, Shumaya B
Atty. Docket: 7432-0046
Applicants: Moenning and Irlbeck
Invention: DENTAL ANESTHESIA ADMINISTRATION
MASK AND EYE SHIELD
Serial No.: 10/647,991
Filed: 26 August 2003

CUSTOMER NUMBER: 000031425

Box Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313

Certificate of Express Mailing Under 1.10	
I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service as "Express Mail, Post Office to Addressee" by the certificate number set forth below, in an envelope addressed to:	
Mail Stop Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
Dated:	15 May 2006
Signature:	<i>Marianne E. Ries</i> Marianne E. Ries
Exp. Cert. No.:	EV 807884909 US
Deposit Account: The Commissioner is hereby authorized to deduct any defect or deficiency in fee, or credit any overpayment to: Deposit Account No. 50-1590	

Dear Sir:

Transmitted herewith is a response in the above-identified application:

The fee has been calculated as shown below:

CLAIMS AS AMENDED							
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	NUMBER EXTRA	SMALL ENTITY		OTHER	
TOTAL CLAIMS	35	34*	1	Rate x \$25	\$ 0.00	Rate x \$50	\$50 .00
INDEP. CLAIMS	6	5**	0	Rate x \$100	\$0.00	Rate x \$200	\$ 200.00
TOTAL FEE FOR ADDITIONAL CLAIMS						\$250.00	

* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

** If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in this space.

 X An Extension of Time for 1 month (or however many months is necessary) is hereby requested under 37 C.F.R. 1.136(a).
The required fee for filing this extension is: \$ 120.00

TOTAL FEE FOR THIS AMENDMENT

 \$ 370.00

 X A check in the amount of \$370.00 to cover the total fee for this amendment is attached.

Applicant asserts that it is entitled to Status as Small Entity Under 37 C.F.R. 1.27.

The Commissioner is hereby authorized to charge any additional filing fees under 37 C.F.R. 1.16 or processing fees under 37 C.F.R. 1.17 which may be required during the prosecution of this application, or credit of any overpayment, to E. Victor Indiano's Deposit Account No. 50-1590. A duplicate copy of this sheet is enclosed.

E. Victor Indiano

Attorney of Record
Printed Name: E. Victor Indiano
Registration No.: 30,143